

Pam
Lepers
(Uncat)

MAR 13 1957



Leon V. Kofod

Ministry to the Victims of Leprosy

CONGREGATIONAL CHRISTIAN
DISCIPLES OF CHRIST
PROTESTANT EPISCOPAL
REFORMED CHURCH IN AMERICA

"The Key to Leprosy is the Child"

states Dr. Robert G. Cochrane, world renowned leprologist and medical advisor to American Leprosy Missions, Inc. Most cases of leprosy are contracted in childhood, though the disease may not become apparent till later.

"If all little *children* could be separated from their infected parents, the disease could be brought under control by that means alone in due time," adds Doctor Cochrane. The separation of babies at birth from the source of contagion is an almost 100% guarantee against contagion.

Children are not only more susceptible than are adults but also are more responsive to treatment. If treated early, they may be saved entirely from the terrible deformities that plague leprosy sufferers.

These facts have brought about a change of emphasis in leprosy work. American Leprosy Missions, Inc. is helping with the care of over 2,000 uninfected *children*. Also great stress is given to early detection of the disease.

"Suffer the little *children* to come unto me, and forbid them not, for of such is the kingdom of heaven." Matt. 19:14.

Congregational Christian

AMERICAN BOARD OF COMMISSIONERS FOR FOREIGN MISSIONS

Angola

Number of Leprosy Colonies	9
Population	4,168,000
Leprosy Cases	Unknown

"The other day when I was examining the patients, a lovely thirteen-year old girl came in. She had a beautiful face but such pitiful hands and feet! No toes, and her fingers on the way to being badly crippled. I asked her *why* she hadn't come sooner for treatment. She replied, "No one bothered enough about me to bring me."

These words imply both the plight and hope of the victims of Hansen's disease (leprosy). They were written by Anne E. Copithorne, R.N., secretary of the Cavangu Committee and visiting nurse at the **Cavangu** leprosy community in Angola. In the cooperative tradition of the American Board of Commissioners for Foreign Missions this is a joint project of Congregational missionaries with those of five other boards.

The Cavangu community was founded in 1949 at the suggestion of American Leprosy Missions. Since that year ALM has given it \$70,583. On 3,000 acres of land given by the government, farm and hospital equipment, massive supplies of lumber and bricks, have been assembled, a mile and a half of water system installed, six permanent and about thirty temporary buildings put up. Six sewing machines, an ox-driven pug-mill, a roof-tile press, a floor-tile press are being used with increasing skill by the 283 patients resident at the end of 1954. (Fourteen had been discharged as "cured").

Best of all in promise for the future is the village of ten little houses where, at last, all the uninfected boys and girls have been placed beyond the danger of infection. ("Yesterday we had a building bee," wrote Miss Copithorne, "and everyone helped to build one of the houses.") Not yet, unfortunately, the nursing babies. "To separate *them* would be still beyond our power. Some of the mothers think we want *to eat them later*."

That (to us incredible) fear roots deep into tribal life and into the savage exploitation of Africans by white men. "Most of our folk are fearful of anything even remotely connected with the white folk." Wisely the missionaries give leadership to the African staff, to whom (Miss Copithorne adds) "we are truly thankful for their loving kindness. To see Sr. Evaristo Socola welcome new patients is to see love at work." With warm appreciation she names Sr. José Salukamba, pastor of the Dondi Church, Sr. Israel Freitas, pastor of the local church, Srs. Herculano and Antonio, the nurses. Do these seem to you only names in a routine list? But they are the spiritual blood of this True Community.

Other Committee Members: Rev. Emil Pierson, W. S. Gilchrist, M.D., Allan T. Knight, Ph.D.

Resident Manager: Sr. Joao Marques Gomes.

"Whenever I feel tired or discouraged I like to go over to Elavoko." Miss Marie Crosby, veteran nurse and woman-of-all-trades at the Sara Hurd Scott Memorial Hospital, **Dondi**, Angola, is talking about the Congregational—United Church of Canada leprosy community. Not a place *you* would choose to go when tired or discouraged? Well reconsider:

"Alberto Sanguene is working hard on the flower beds, especially around the new recreation hall and his own new house. The ten small houses are finished except for plastering. The recreation hall has the walls up and the roof on. We shall hurry to move the big loom over, so we can use *its* house for carpentry. Since the little houses cost less than \$50 each, we built a two-room house as a model, which any African could easily imitate. And added a model chicken house with leftover bricks!"

There it is. And about 100 people live there, do an immense amount of work on the land and buildings. Soon Miss Lois King of the A.B.C.F.M., studying language at Dondi, will be training an African to manage a handicrafts program. Twenty-four of them are members of the community's church. Last year they gave a sum comparable to \$300 here, and half as much more for the tubercular patients.

Elavoko is an outgrowth of work begun in 1924 by Congregational missionary Dr. H. S. Hollenbeck at a simple camp in the woods — the first leprosy work to be done in the entire area, probably even the first in Angola. Out of it grew eight similar camps, a number of clinics, and Elavoko itself.

Superintendent, W. S. Gilchrist, M.D.

India

Number of Leprosy Colonies	85
Population	361,900,000
Leprosy Cases (estimated)	1,700,000

In 1953 a visitor arrived at the Dayapuram Leprosy Hospital, **Manamadura**, a few days after the first rain had fallen there in seven years! As he walked over the Arizona desert of the compound he noticed tiny feather-leaved green plants lifting up minute flowers like blue jewels. He was amazed. He thought that either the roots must have burrowed incredibly far to a hidden water source or the seeds must have lived inviolable by drouth.

The life he found in this leprosy community seemed to him to have survived like these plants. It had begun long ago — in 1913 — when recovery from leprosy had scarcely been thought of. “On the unit system,” as the founder, Rev. C. Stanley Vaughan, wrote; “one plot of land, one house, one patient, and one tree!” It grew to be a village of 300 people on about 100 acres of land, with a garden and *at least* one tree to every able-bodied patient; a model esteemed by the government and the surrounding populace. Then had come the drouth, which destroyed the whole farm program. It was followed by a “drouth” in government policy, and an administrative problem that almost gave Dayapuram a death-blow. Patient numbers and government financial help were at low tide. A newly-appointed medical officer was holding on but discouraged.

All this changed in 1954. A new superintendent was appointed — himself a distinguished doctor of the Willis S. Pierce Memorial Hospital. A government grant was restored, and consequently fifty more patients were admitted from the two-year waiting list. A “paying” ward has been opened. Gardening and other forms of work are picking up again.

But what gave the visitor the sharpest feeling of hope was the queue of children he watched passing the doctor’s clinical table. They were being tested for signs of receding leprosy; and the signs were being found.

This cooperative project of A.B.C.F.M., The Church of South India, the Mission to Lepers (London) and ALM, receives \$25,000 a year from the latter two bodies.

Supt. Dr. E. S. Chellappa; Medical Officer, Dr. G. T. Sundaram.

Disciples of Christ

UNITED CHRISTIAN MISSIONARY SOCIETY

Congo Belge

Number of Leprosy Colonies	105
Population	11,259,000
Leprosy Cases (estimated)	200,000

Malia's father is headman of the **Mondombe** leprosy community. He came as a patient ten years ago and began to get the sulfone drugs as soon as they were released for public use, but that was too late for Malia. When she was only two, tiny spots appeared on her otherwise flawless brown body. Her mother wanted to drown herself from grief and guilt (she had already been accused by her in-laws of causing her husband's leprosy by bewitching him), but the Christians in her village persuaded her to bring Malia to Mondombe instead. Now her tests, and her father's too, have long been negative. Her father, sister and brother have become Christians. She is in the community school.

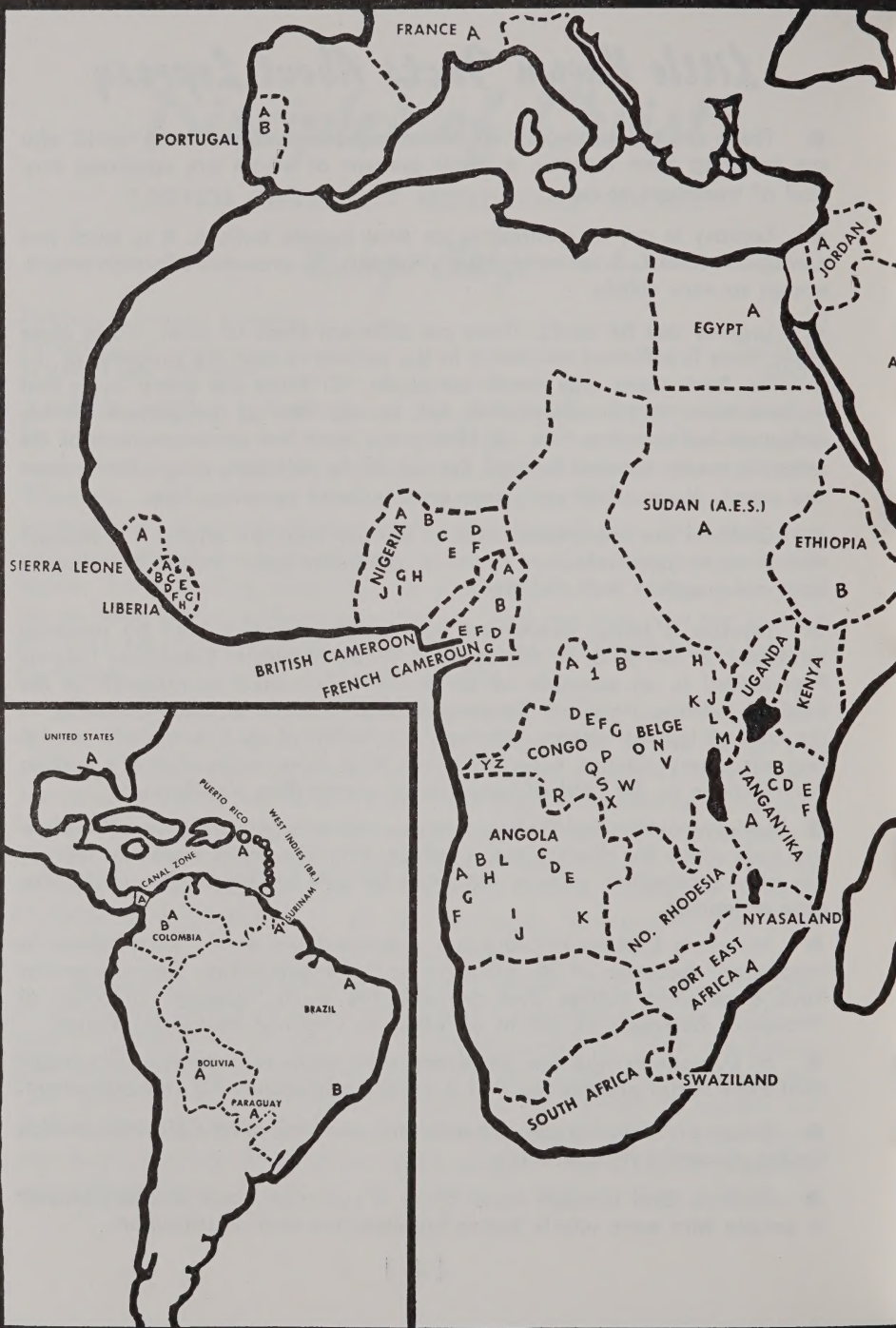
Nurse Buena Stober told us the story of Malia. Here is what her doctor, Donald H. Baker, tells us about *her*: "One of the things this outline doesn't record is the devotion and tireless energy of Miss Stober. Her trips by truck, bicycle and tepoy. Her limitless enthusiasm and good humor. Her hours spent in supervising treatments, baby clinic, school, church, gardens, road repairs, and house construction. It doesn't show, either, the many hours of care by Christian African nurses, the work of Christian African teachers in school and church. It does give some hints of strengthened bodies and 'apparent' cures."

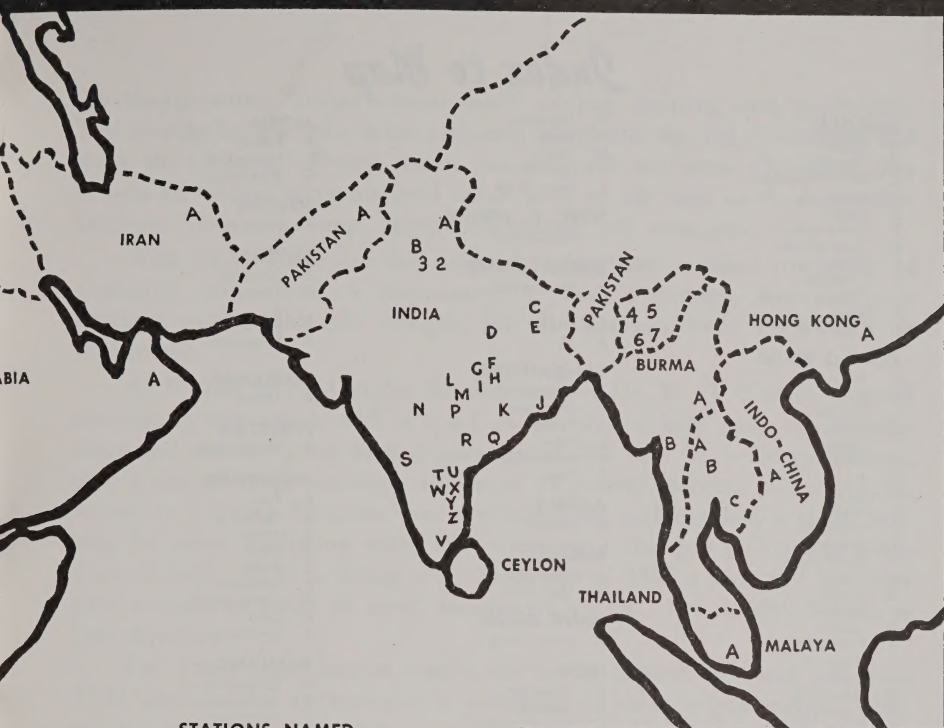
Mondombe is a community of 350 people (80 of them healthy children) who live, work, sometimes quarrel and often tenderly cooperate with one another. Everyone who can, has a paying job. There are fishers, hunters, canoe hewers, weavers, thatch weavers, brick makers, gardeners. Miss Stober buys bread from the women strong enough to garden and gives it to the state supported invalids. She engages the able-bodied (both men and women) in building two-room cottages. The school boys planted trees and pineapples last year. The girls make cushions from quilt blocks

(Continued on page 9)

Little Known Facts About Leprosy

- There are an estimated ten million people throughout the world who are suffering from leprosy, a small percent of whom are receiving any kind of treatment or care.
- Leprosy is not as contagious as most people believe. It is much less contagious than T. B. or many other diseases, the presence of which people accept so very calmly.
- Leprosy can be cured. There are different kinds of cures. (1) In some cases there is sufficient resistance in the patient to stop the progress of the disease. Such cases may break out again. (2) There are many cases that in time seem to burn themselves out, usually leaving the patient terribly deformed but symptom-free. (3) Now great hope has arisen because of the splendid results secured through the use of the sulphone drugs. Early cases are cured. More advanced cases are rendered symptom-free.
- Children are more susceptible to leprosy than are adults. It is thought that in most cases infection comes in childhood even though the disease does not manifest itself till later.
- Leprosy is being combatted by scientific research and by practical treatment. In the U. S. A. the Leonard Wood Memorial (American Leprosy Foundation) is an example of an institution devoted to research in the field of leprosy. American Leprosy Missions, Inc. is devoted primarily to the care of leprosy victims, although the Technical Medical Advisor and a few missionary doctors associated with ALM have made and are making contributions in the field of research of outstanding significance.
- Leprosy victims find the social stigma more excruciating than the physical pain which the disease may produce. Until the social stigma of leprosy has been eradicated, science will never be able to control or cure the disease of leprosy.
- American Leprosy Missions has expunged the word "leper" from its vocabulary because of its offensive social implications. Some agencies have gone even farther and dropped the word "leprosy" in favor of "Hansen's Disease" (H. D.) in an effort to undercut this social stigma.
- H. D. patients who are cured and who return to community life again must have social acceptance and a normal opportunity for re-employment.
- Surgery is restoring use of hands and removing other deformities which hinder successful rehabilitation.
- Faith in God through Jesus Christ is restoring hope and self-respect in people who were utterly lost in hopelessness and degradation.





**STATIONS NAMED
IN THIS BOOKLET**

ANGOLA

- I Cavangu
- H Dondi

CANAL ZONE

- A Palo Seco

CONGO BELGE

- G Mondombe
- F Wema

INDIA

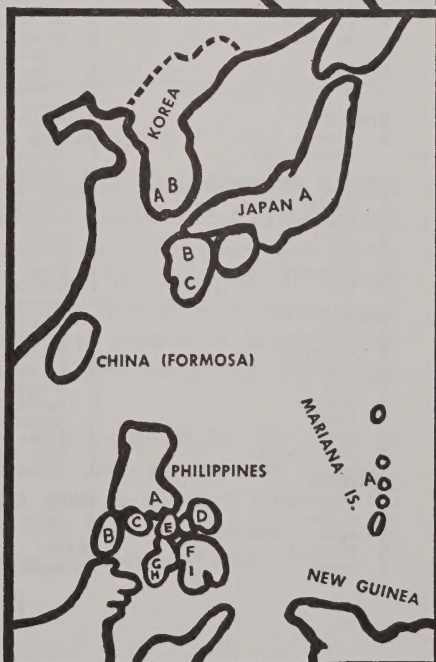
- V Manamadura
- I Mungeli
- Y Ranipet
- Z Wandiwash

JAPAN

- C Kagoshimo
- B Kumamoto

LIBERIA

- A Kailahun (Bolahun)
- B Mbalomah (Cape Mount)



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- J Calota
- K Muie
- L Chissamba

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- A Barrio Grande

SURINAM

- A Paramaribo

for the invalids. Three women teach sewing, knitting and crocheting. Two evangelist teachers (also patients) shepherd the 191 Christians and teach the children. Every ration day you will see some Christian offer to help an invalid carry his food home, pick up his cane, or do some other kindness for a newcomer, frightened among 350 strangers.

With ALM funds and the work of the patients, a plant consisting of a church and school, a dispensary, a pastor's cottage, and nearly a hundred mud-and-thatch cottages for the patients have been built at Mondombe.

At **Wema** in 1951 under the direction of Dr. W. H. Horner, a small community was begun with a spurt of exceptional help from the government and quickly grew to a population of 268 and 93 healthy children, with a central brick building, 100 acres of planted garden, and a church. American Leprosy Missions was providing the sulfones and a small subsidy for other medicines when the government changed policy and withdrew all help. ALM is filling in to the extent of \$450 a year and last year gave enough to build 26 small individual houses. Dr. Robert Bowers is now director.

Two other communities nearby are not at present receiving aid from ALM because the government is fulfilling all their requirements. They are at Lotumbe and Monieka.

India

(See page 3 for statistics)

A clinic at the Christian Hospital, **Mungeli**, treats about 45 persons twice a week. Drs. Phillip James, Frederick Daniel and Florence Singh take turns, while Dr. Victor C. Rambo, distinguished eye-specialist, examines the eyes which leprosy (as it often does) has damaged. He reports that such damage is much less frequent than it used to be when chaulmoogra oil was in use. "The patients have trouble in keeping their glasses," says Dr. Rambo, "because most of them never had any before. Some in their poverty sell their glasses!"

A separate listing is not given in this pamphlet for the clinic at Takhatpur because no funds from ALM or London appear to be required. A few patients are treated weekly who used to go to a clinic at the Jahargaon Home — recently closed because only non-infective crippled cases remained there, who were absorbed into other Homes.

Protestant Episcopal

NATIONAL COUNCIL OF THE PROTESTANT EPISCOPAL CHURCH

Canal Zone

Let us call him Smith. He turned up a few years ago at weekly services being conducted by Archdeacon Nightengale at **Palo Seco**. He was in profound despair, with no future and no hope of a future. Only in his thirties, he had lost his job, friends, wife and children because the disease which had suddenly been recognized in his body was thought to be "loathesome." Attending services and receiving with frequency and regularity the Holy Communion brought him his first faint light.

Then (Bishop Gooden reports) "followed excellent and enlightened treatment through Dr. Hurwitz at the government sanitarium and 'cure;' or what amounts to that for him. He has a job, is exceedingly grateful for help through American Leprosy Missions and the Episcopal Church which ministered to him through all his sickness."

ALM's share in this work is a grant to cover the expenses of Ven. L. B. Shirley in his ministry to some thirty Protestant patients at the sanitarium referred to above.

Japan

Population	84,600,000
Leprosy Cases (estimated)	50,000

As at Palo Seco a ministry is provided at the Japanese government leprosaria in **Kagoshima** and **Kumamoto**, where American Leprosy Missions has recently built chapels. Rev. Samuel Akiyama does effective pastoral work among the 2500 patients.

Liberia

Population	1,658,000
Leprosy Cases (estimated)	2,300

On 500 acres of fertile land provided by the Liberian government 94 men and women and 12 children lead a contented and productive life

in a community called Mbaloma (Place of Healing) near **Cape Mount**. They have good rice lands and produce most of their own food. In 1954 the number of farms was increased and oil palms, coconut palms, orange and cocoa trees were planted.

Healthy children are put in foster homes in nearby Robertsport. They will eventually be turned over to some member of the patient's family or put in the mission school. Anti-leprosy drugs are supplied by the U.S. Public Health Mission, and an annual grant of \$2,000 for maintenance is given by American Leprosy Missions. In 1954 four patients were released as symptom free.

In charge of the community is a capable Liberian medical worker, Mr. Thomas Haines; medical director is Dr. W. R. Orr of St. Timothy's Hospital. He will be relieved in May 1955 by Dr. J. F. H. Stewart.

Another "Place of Healing" began in 1952 with a small clinic of the Holy Cross Mission, attached to its hospital at **Bolahun** close to the borders of Sierra Leone and French Guinea, where leprosy victims began to flock from all three countries. The Holy Cross Fathers decided to create for them a village of their own "as much as possible like a native town." "This gives them a sense of familiarity and security," writes Joseph H. Smythe, M.D. "They are not cut off from their former habits and patterns of life."

Reformed in America

India

(See page 3 for statistics)

They came from every direction — men, women, little children, even entire families. Most of them came by foot, some few in a cart drawn by bullocks whose horns were painted, one blue, one yellow. All morning they gathered on this dusty country road a few miles out of the little town of **Wandiwash**.

In a billow of dust what they were waiting for so patiently came rolling up the road — a mobile dispensary with Dr. Margaret Rottschaefer, medical missionary, of the Reformed Church in America. She walked over and stood in their midst. Then she talked to them quietly in Tamil, telling them of the love of Christ. When she had finished, her assistants

brought out the medical supplies and Dr. Margaret gave them the latest drugs against Hansen's disease.

The clinic is only one of seven tree-shaded stops on seven different country roads, where many years ago the then young and newly commissioned lady doctor started giving chaulmoogra oil injections in a small tent. She still has the tent. It provides the only privacy in her simple thatched house with a cement floor, entirely open to the out-of-doors. But now her clinic on wheels enables her to care for 1,400 patients a week.

At the Scudder Memorial Hospital, **Ranipet**, Dr. J. C. Savarirayan has an increasing attendance of leprosy patients at a Friday clinic year by year. The average is 410. Dr. Savarirayan especially remembers Govindaraj, who came five years ago with extensive leproid lesions. Now they have disappeared and he looks almost normal. Now, as was not possible in the earlier years, he is not afraid to admit leprosy patients having other diseases, too, into the general wards of the hospital. Miss W. Noordyk, the nursing superintendent, gives the patients personal attention, especially distributes CARE parcels and packages received through Church World Service. Dr. Savarirayan pays tribute to Dr. Galan Scudder, now retiring after 35 years, for his unfailing interest in leprosy and warm friendliness toward these patients.

Arabia

At **Muscat**, in connection with the Knox Memorial Hospital, Dr. Wells Thoms had been treating a few patients in a clinic for many years. Then ALM made a grant for a small residence for them and is now paying for a Christian male nurse on full time duty.

Dr. Thoms wrote, late in 1954, that he must always both treat and feed his patients, for all are destitute and the local government has not yet been persuaded to help. He would have to curtail or stop his help to them except for ALM's \$1,000. Since starting in 1941 he has discharged several as negative and two of them are working for his hospital as gardener and dresser. This has led more than formerly to come for treatment — which he restricts to non-residential treatment so far as possible.

Dr. Thoms read a paper before the Persian Gulf Medical Association in November, 1954, on "The Treatment of Leprosy in the Dispensary." While he is on furlough during '55 and '56, Dr. Bernard Voss will carry on his work.

Thus With Financial Aid and Technical Counseling

AMERICAN LEPROSY MISSIONS, INC. helps the missionaries of the American Churches to care for the victims of leprosy. In this way American Leprosy Missions, Inc. operates as an AUXILIARY OF ALL BOARDS enabling medical missionaries and others the world over to care for and often cure people with leprosy.

The hope of healing is now greater than ever before. With healing comes the necessity of rehabilitation, (1) physically, through orthopedic surgery and physiotherapy, (2) vocationally, through training to become self supporting, and (3) spiritually, through faith in Jesus Christ and through fellowship with Christians.

From where will AMERICAN LEPROSY MISSIONS get the money which has been promised to the missionaries for their leprosy work?

Only from the voluntary contributions of people who want to help with this work.

Does AMERICAN LEPROSY MISSIONS receive bequests and annuities?

Yes, write for our leaflets on this subject.

Where may gifts for leprosy work be sent?

To any accredited volunteer representative or to any address on the next page.

"Lord, if thou wilt, thou canst make me clean. And He put forth his hand and touched him saying, I will: be thou clean." Luke 5:12, 13.

CONGREGATIONAL CHRISTIAN

The American Board is deeply indebted to Americal Leprosy Missions for the grants which they make to aid in the projects carried on by our missionaries as set forth in this pamphlet. Although gifts by Congregational Christian Churches to American Leprosy Missions cannot be given credit on apportionment, we commend the Mission to the churches for gifts which will not interfere with their apportionment giving.

Executive Vice President
ALFORD CARLETON

DISCIPLES OF CHRIST

The United Christian Missionary Society has always taken delight in its cooperation with American Leprosy Missions both in India and Africa. The officials of ALM have always been graciously cooperative, liberal in their contributions, and understanding of all problems.

VIRGIL A. SLY
Chairman, Division of Foreign Missions

PROTESTANT EPISCOPAL

The National Council of the Episcopal Church is deeply indebted to American Leprosy Missions for the constant and generous aid which they have given to our work for victims of leprosy — aid on which we gratefully rely for maintaining that work.

(THE RT. REV.) JNO. B. BENTLEY
Vice President

REFORMED CHURCH IN AMERICA

The Reformed Church in America appreciates the financial assistance received through American Leprosy Missions, Inc. for leprosy work in the stations described in this leaflet. With the Mission Board's supply of the medical missionary and ALM funds for work, we have an economical and effective approach to the problem.

B. M. LUBEN, D.D.
Secretary, Board of Foreign Missions



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